

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	338	9-10
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim		Date	
Final	Original		
1	1	9/9	1/1
2	2	9/9	1/1
3	3	9/9	1/1
4	4	9/9	1/1
5	5	9/9	1/1
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Claim		Date	
Final	Original		
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SYMBOLS

✓ Rejected

— Allowed

(Through numerical) Canceled

N Restricted

I Non-elected

A Interference

O Appeal

0 Objected